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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

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Response To Official Action

EXAMINER	
Frenal, Vanel	
ART UNIT	PAGE NUMBER
3828	2

REMARKS

Claims 1-51 were rejected pursuant to 35 U.S.C. § 103(a) as being unpatentable over Evans (U.S. Patent No. 6,347,329) in view of Harvin et al. (Managed Care: New Financial Practice/Strategies . . .) and further in view of PR Newswire (iMedica Creates the Most Comprehensive . . ., PR Newswire, N.Y. Jan. 18, 2000). Applicants respectfully request reconsideration of the rejection of claims 1-51, including independent claims 1, 25 and 39.

Independent claim 1 recites obtaining a medical record comprising structured and unstructured data, analyzing at least the unstructured data with a computer and automatically extracting billing information as a function of the analysis. Similarly, independent claim 25 recites an engine of a device that analyzes structured and unstructured data as a function of domain specific criteria and extracts billing information as a function of the analysis. Likewise, independent claim 39 recites instructions for a program implemented on a machine for analyzing instructed data. Evans and Harvin et al. do not disclose analyzing with a computer "from at least the unstructured data source" and "automatically extracting billing information from the medical record as part of the analysis." Instead, the Examiner relies on PR Newswire and alleges these features to be known in the art as evidenced by PR Newswire.

PR Newswire discloses gathering data at the point-of-care (page 2, paragraph 11). Documentation is provided electronically, and a physician is guided through medical choices and diagnosis codes (page 2, paragraph 5). The physician chooses information from the knowledge base to make charting easier (page 2, paragraph 5). A preinstalled template is used to develop a chart once the physician has arrived at a diagnosis (page 2, paragraph 5). Billing codes may be created based on choices made using the charting template (page 3, paragraph 13), and drug interactions may be automatically checked (page 2, paragraph 1). However, the program is not a diagnostic tool (page 2, paragraph 5). PR Newswire merely shows assisting the physician in electronic chart making using a template on a wireless device. PR Newswire discloses collecting data in a specific record, so does not suggest analysis by a device of unstructured data. None of the three references (Evans, Harvin et al. and PR Newswire) suggest this limitation of claims 1, 25 and 39.

The Examiner alleges that PR Newswire, at page 2, paragraphs 2-3 and 11-12 and page 3, paragraph 1, teaches analysis by a device of unstructured data and extraction of billing information as a function of the analysis. Paragraph 11 (page 2) describes charting on a real-time basis to create an Internet record, and allowing instant access from an Internet connected computer.

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